## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1069 6531

CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN	
TOTAL CLAIMS					(COIU	(COIGHILLE)				OR 1		
			1.8					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGEA	ABLE CLAIMS	15 mir	us 20=	*			X\$ 9=		OR	X\$18=	
INE	EPENDENT C	LAIMS	æ mi	nus 3 =	[ <u>*</u>			X43=	_	OR	X86=	•
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		ÖR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)	• .	(Column 2) (Co			,	SMALL	NTITY	OR	SMALL	
AMENDMENT A	ofnos	REMAINING AFTER AMENDMENT	٠	NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 18	Minus	# Z	O	= /		X\$ 9=	. 1	OR	X\$18=	
	Independent	· 2	Minus	***	3	= /		X43=		OR	X86=	
	- FIRST PRESE	NTATION OF MU	LIPLE DEF	ENDENT	CLAIM		ا . ا	+145=	/	OR	+290=	
								TOTAL ADDIT, FEE		ОR	TOTAL ADDIT, FEE	
		,		· · · · · · · ·								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI TIONAL FEE		RATE	ADDI- TIONAL :FEE
	Total	•	Minus	**		=	Jſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	]	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
•		•			•	. •	L	+145=		OR	+290=	·
				•			. А	TOTAL DDIT, FEE		OŘ,	TOTAL ADDIT. FEE	
	_	(Column 1)	·	(Colum		(Column 3)				•		•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	• •	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	``		<b>!</b>	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290= TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					er four	nd in the app	opriate box	in col	umn 1.	